



## Building Department

201 W Market St  
Kingsport, TN 37660  
Tel: 423-229-9393  
Fax: 423-224-2680

Construction Type (Please Check One)      ☐ Residential      ☐ Commercial

Commercial jobs **MUST** submit plans review fee with application

Project Address \_\_\_\_\_

Name of Business/Complex (if applicable) \_\_\_\_\_

### Project Owner Information

Name \_\_\_\_\_ Telephone \_\_\_\_\_

### Contractor Information

Name \_\_\_\_\_ Telephone \_\_\_\_\_

### Contact Person for Project

Name \_\_\_\_\_ Telephone \_\_\_\_\_

#### Type of Project

☐ New Construction      ☐ Repair/Remodel

☐ Addition      ☐ Other

#### Sprinklered

☐ YES    ☐ NO

### Description of Project

**Total Construction Cost:** \_\_\_\_\_

**Total Square Footage:** \_\_\_\_\_

The applicant whose name appears below agrees to comply with all City of Kingsport Ordinances & Codes and further agrees that the above work will be done by a properly qualified person.

Contractor/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_